UTILITY PATENT APPLICATION TRANSMITTAL Poly for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	00862.023414
First Name	d Inventor or Application Identifier

KENICHIRO ONO, ET AL.

Express Mail Label No.								
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
1. X	Fee Transm (Submit an ori	ittal Form iginal, and a duplicate for fee p	rocessing)		7.	CD-ROM or Program (A	•	e, large table or Computer
2.	Applicant classes 37 CFR	t claims small entity status. CFR 1.27.			8.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. X	Specification	n <i>Total Pa</i>	ages 34			a C	Computer Readab	le Form (CRF)
4. X	Drawing(s) ((35 USC 113) Total SI	neets 14				ation Sequence Li CD-ROM or CD-R	_
5. X	Oath or Dec	laration Total Pa	ages 02			一	paper	(L 33p.33), C.
	a. X N	ewly executed (original or	сору)			c. S	Statements verifyir	ng identity of above copies
						ACCOM	PANYING APPLIC	CATION PARTS
	1 1	opy from a prior application or continuation/divisional wit	, , , , , , , , , , , , , , , , , , , ,		9. X	Assignment	Papers (cover shee	t & document(s))
	i.	DELETION OF IN Signed Statement a			10.		(b) Statement is an assignee)	Power of Attorney
		inventor(s) named in 37 CFR 1.63(d)(2) a	n the prior application and 1.33(b).	, see	11.	•	nslation Documer	
6. X	Application I	Data Sheet. See 37 CFR	1.76		12. X	Information Statement (IDS)/PTO-1449	X Copies of IDS Citations
					13.	Preliminary	Amendment	
		•			14. X		eipt Postcard (MP specifically itemiz	
					15.		py of Priority Doc riority is claimed)	ument(s)
				į	16.	Other:		
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							<u>-,, .,</u>	
17. If a C	CONTINUING	APPLICATION, check ap	propriate box and s	upply t	he requisite	information:		
Prior appli	Continuation information		Continu	ation-ir	n-part (CIP)		lication No/_	
considered	d a part of the		ing continuation or div	visional	application a	nd is hereby in		on is supplied under Box 5b, is ence. The incorporation can only
			18. CORRE	SPONE	DENCE ADDR	RESS		
X Customer Number or Bar Code Label (Insert Customer No. or Attack			14		or Corres	spondence address below		
NAME								
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Address	i							
City	-		State	Ι			Zip Code	
Country			Telephone				Fax	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	7-20 =	0	X \$ 18.00 =	\$ 0
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 86.00 =	\$ 0
	MULTIPLE DEPENDENT	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$290.00 =	\$
				BASIC FEE (37 CFR 1.16(a))	\$770.00
	-		Total of	above Calculations =	\$770.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL -	6770.00
9. Sn	nall entity status A small er	ntity statement is enclose	d	TOTAL =	 \$770.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Christopher Philip Wrist Registration No. 32,078			
SIGNATURE	alres de			
DATE	January 23, 2004			

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